

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	BH	10395	
O.I.P.E. CLASSIFIER			7/14/00
FORMALITY REVIEW	S. H.	62045	7/14/00
RESPONSE FORMALITY REVIEW	J.S.	69134	12-9-00

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 — (Through numeral) ... Canceled A Appeal
 ÷ Restricted 0 Objected

Claim	Final	Original	Date
1	✓	2	
2	✓	3	
3	✓	4	
4	✓	5	
5	✓	6	
6	✓	7	
7	✓	8	
8	✓	9	
9	✓	10	
10	✓	11	
11	✓	12	
12	✓	13	
13	✓	14	
14	✓	15	
15	✓	16	
16		17	
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25		26	
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27		28	
28		29	0
29		30	✓
30		31	1
31		32	1
32		33	✓
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42		43	
43		44	
44		45	
45		46	✓
46		47	0
47		48	✓
48		49	✓
49		50	

Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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